

Claims Clues

A Publication of the AHCCCS Claims Department

May, 2003

AHCCCS Freezes Physician Fee Schedule

AHCCCS has frozen the current physician fee schedule rates, thus implementing a 0% update for those physician fees typically updated on April 1.

The action was taken in response to provider network concerns regarding the Medicare Physician Fee Schedule updates, the potential for additional adjustments to Medicare's 2003 rates, and the current budget

situation in Arizona.

However, AHCCCS has added or updated rates for 485 procedure codes on the AHCCCS fee schedule effective for dates of service on and after April 1, 2003.

This update includes:

- Rates for 320 new procedure codes
- Rates for 50 codes previously priced "by report"
- Rates for 115 codes received adjustments in relation to the

quarterly DME updates.

The AHCCCS fee schedule is available on the AHCCCS website at www.ahcccs.state.az.us.

Click on the Information for Providers link to display the Providers page. The entire fee schedule or groups of procedure codes can be viewed.

Rates are downloadable from the website as text or Excel files, and are searchable by both procedure code and description. □

7 Health Plans Win Acute Care Contracts

Seven health plans, including one new to Arizona's Medicaid system, have won acute care contracts from AHCCCS.

The seven plans were among 10 bidders that competed for contracts to serve AHCCCS members by Geographic Service Area (GSA) throughout the state. The contracts take effect Oct. 1.

The winning plans include Care 1st, which will be new to AHCCCS. Care 1st is based in

California and won a contract to serve AHCCCS members in Maricopa County.

The other winners include existing plans Arizona Physicians IPA, Mercy Care Plan, Health Choice Arizona, Maricopa Health Plan, Phoenix Health Plan/Community Choice and Pima Health Plan.

Plans that did not win contracts included University Family Care, which currently serves Pima County; Family Health Plan of

Northeastern Arizona, which currently serves Apache, La Paz, Mohave and Navajo counties; and CIGNA, which announced that it would not submit a bid.

AHCCCS evaluates plans according to their program structure, which includes quality assurance, management programs and member services; internal organizational structure; their proposed rates and financial viability; and the development and
(Continued on Page 2)

Manual Updated to Reflect CMS 1500 Claim Form Changes

Chapter 5 of the *AHCCCS Fee-For-Service Provider Manual* has been updated to change the data requirements for the CMS 1500 (formerly HCFA 1500) claim form and to reflect the new name of the form.

The data requirements for Fields 11, 11a – 11c, and 14 have been changed from "Not required" to "Required if applicable." This change will assist AHCCCS in identifying any third party liability for a claim.

The change has been made to the on-line version of the manual, available on the AHCCCS Web site at www.ahcccs.state.az.us. Providers who have a paper copy of the manual should note this change. □

7 Health Plans Win Acute Care Contracts

(Continued from Page 1)

management of their provider networks.

This year, AHCCCS reduced the number of GSAs from nine to seven. Six health plans won

contracts to serve Maricopa County, which is its own GSA.

Four health plans won contracts to operate in the GSA that serves Pima and Santa Cruz counties, although only two of the four

plans will be operating in Santa Cruz. All other GSAs will have two health plans each.

The new contracts are for a five-year period, renewable each year at AHCCCS's option. □

AHCCCS Acute Care Health Plans Effective October 1, 2003

GSA	Counties	Health Plans
GSA 2	Yuma, La Paz	APIPA, Mercy Care Plan
GSA 4	Apache, Coconino, Mohave, Navajo	APIPA, Health Choice Arizona
GSA 6	Yavapai	APIPA, Mercy Care Plan
GSA 8	Gila, Pinal	Health Choice Arizona, Phoenix Health Plan/Community Connection
GSA 10	Pima, Santa Cruz	APIPA, Pima Health Plan, Health Choice Arizona (Pima only), Mercy Care Plan (Pima Only)
GSA 12	Maricopa	APIPA, Care 1 st , Health Choice Arizona, Maricopa Health Plan, Mercy Care Plan, Phoenix Health Plan/Community Connection
GSA 14	Cochise, Graham, Greenlee	APIPA, Mercy Care Plan

Provider Access to Claims Department Restricted

Providers are no longer allowed to enter the AHCCCS Claims Department to check on the status of their claims.

The Claims Department has been secured as part of the agency's compliance with the privacy provisions of the Health Insurance Portability and Accountability Act (HIPAA).

The AHCCCS Administration must ensure that all files and documents containing protected health information (PHI) have limited access. This involves procedures such as securing floors and activating security cards for restricted access to work areas.

The AHCCCS Administration offers providers several methods for checking on the status of fee-for-service claims.

AHCCCS Web Site

To begin using the Web site application, providers must go to the AHCCCS Home Page at www.ahcccs.state.az.us. Once at the Home Page, click on the Information for Providers link to go to the Providers page. A link on the Providers page will allow providers to create an account.

Please See Attachment

Once a provider has access to the secured site, the provider can view information relating to a claim, including status history, edit history, and accounting summary. Providers also can obtain recipient eligibility and enrollment information and Medicare/TPL information for a recipient.

There is no charge to providers for creating an account, and there is no transaction charge.

Claim Status Request Form

The *AHCCCS Fee-For-Service Provider Manual* contains a form that providers may use to check the status of claims. The Claim Status Request Form is available at the end of Chapter 26.

Providers should fax the completed form to the AHCCCS Claims Research/ Adjudication Unit at (602) 253-5472.

Claims Customer Service

Questions about claims also may be directed to the Claims Customer Service Unit at:

- (602) 417-7670, Option 4 (Phoenix area)
- 1-800-794-6862 (All others)

Hours of operation are 7:30 a.m. to 4:00 p.m., Monday through Friday. □

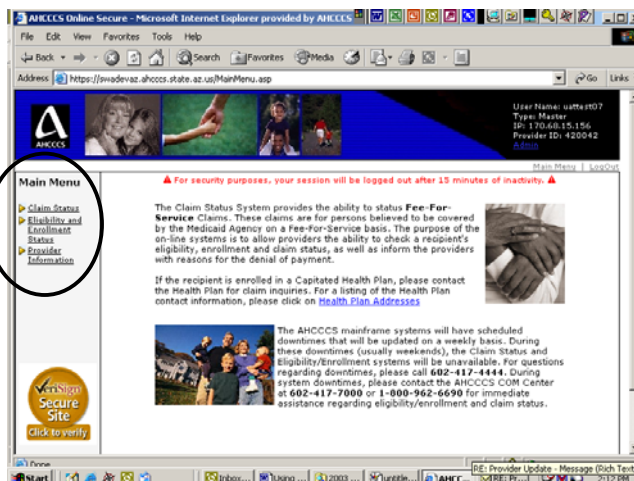
Using the AHCCCS Web Site

www.ahcccs.state.az.us

AHCCCS has created a Web application that allows you to check the status of fee-for-service claims and verify recipient eligibility and enrollment using the Internet. You also can update your Correspondence address on-line. The Web application also allows you to view (but not update) your Service and Pay-to Addresses, Group Affiliations, and Authorized Signatures.

To create an account and begin using the application:

1. Open the **AHCCCS Home Page** at www.ahcccs.state.az.us.
2. Click on the **Information for Providers** link to go to the **Providers** page.
3. Click on **Check Eligibility/Enrollment and Claim Status on-line** link to begin creating an account. Registered users also will click here to begin using the Web application.
4. Use the Main Menu to select the action you wish to take.



Master accounts and Individual accounts can be created. Both types of accounts will allow you to check claims status and view eligibility and enrollment information. However, a Master account holder also has the ability to administer all Individual accounts for the same provider. This allows a provider representative, such as a billing supervisor or office manager, to monitor and maintain access to information from the system.

When the Master account sign-up process is completed, a letter is generated and sent to the mailing address specified by the Master account holder. The letter contains the authentication code necessary to activate the Master account.

Once the Master account is activated, the Master account holder will have the ability to activate new Individual accounts. Master account holders will receive an email each time an Individual account is created, notifying the Master account holder that the Individual account is awaiting activation.

Providers should direct *technical questions only* to the AHCCCS Customer Support Unit at (602) 417-4451. The unit can assist providers with issues such as accessing the Web site, setting up master and individual accounts, and resolving error messages. All other questions regarding information displayed on the Web site should be directed to the appropriate AHCCCS unit (e.g., Claims Customer Service, Provider Registration, Verification Unit, etc.).